

10/18/01
1046 U.S. PTO

Please type a plus sign (+) inside this box

01-10-02

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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PRO

10/04/1845

10/18/01

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	02307O-110910US	
First Inventor		Levine, Fred
Title	INDUCTION OF BETA CELL DIFFERENTIATION IN HUMAN CELLS	
Express Mail Label No.		EL 827150646 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning design patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 37]
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C.113) [Total Sheets 6]
- Oath or Declaration [Total Pages 1]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

ADDRESS TOAssistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper number of pages
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. §3.73(b)Statement Power of Attorney (*when there is an assignee*)
11. English Translation Document (*if applicable*)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s) (*if foreign priority is claimed*)
16. Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____ / _____

Prior application information: Examiner _____

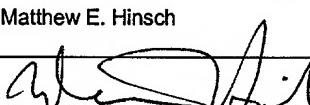
Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 20350 or Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name			
Address			
City	State		Zip Code
Country	Telephone		Fax

Name (Print/Type)	Matthew E. Hinsch		Registration No. (Attorney/Agent)	47,651
Signature			Date	October 18, 2001

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 673)

Complete If Known

Application Number	Not Assigned
Filing Date	October 18, 2001
First Named Inventor	Levine, Fred
Examiner Name	Not Assigned
Group Art Unit	Not Assigned
Attorney Docket No.	023070-110910US

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number

20-1430

Deposit Account Name

Townsend and Townsend and Crew LLP

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	
101	740	201	370
106	330	206	165
107	510	207	255
108	740	208	370
114	160	214	80
SUBTOTAL (1)			(\$370)

2. EXTRA CLAIM FEES

Total Claims	-20**	=	15	X	\$9	=	\$135	Extra Claims	Fee from below	Fee Paid
Independent Claims	7	-3**	=	4	X	\$42	=	168		
Multiple Dependent					X					

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
103	18	203
102	84	202
104	280	204
109	84	209
110	18	210
SUBTOTAL (2)		(\$303)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			

The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.

*Reduced by Basic Filing Fee Paid

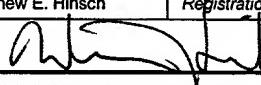
SUBTOTAL (3)

(\$)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Matthew E. Hinsch	Registration No. (Attorney/Agent)	47,651	Telephone	415-576-0200
Signature				Date	October 18, 2001

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